

When your child needs a ventilator



What is a ventilator (vent)?

A ventilator is a machine that can help your child breathe and can provide oxygen. A vent is also called a respirator.

Why does my child need a vent?

Your child may need a vent if they have an illness or injury that affects their ability to breathe. The vent can support your child's breathing until they can breathe well on their own.

Your child may need a vent if they:

- Need more oxygen than using a mask can give.
- Have fluid or mucus in their lungs.
- Are very sick and work too hard to breathe. The work of breathing can be so tiring that it uses up most of their energy. This can delay healing.
- Need help breathing or taking full breaths.
- Have surgery – both during and after.
- Have an emergency, such as if their heart or breathing stops.

How does the vent connect to my child?

The doctor will place an endotracheal tube (breathing tube) in your child's mouth or nose. The breathing tube:

- Goes between the vocal cords and into the windpipe.
- Connects to other tubes that connect to the vent.

Your child will get oxygen while they are on the vent if needed. The care team may also suction through the breathing tube to remove mucus from your child's airway.

The doctor may advise for a breathing tube in the front of the neck (tracheostomy tube) if your child needs long-term breathing support. This type of tube is placed during surgery

Is the breathing tube uncomfortable?

Yes, the breathing tube may be uncomfortable. It may cause your child to gag or cough.

- The doctor may order medicine to help with discomfort and allow your child to rest.
- Your child can hear and understand you while they have a breathing tube, but they will not be able to talk. It is OK to talk to your child and comfort them.

In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.

When your child needs a ventilator, continued

What changes to my child's environment could I expect to see?

- For your child's safety, you may see:
 - Doors left slightly open.
 - Curtains open to the hallway.
 - Lights left on or dimmed so the care team can see your child well.
- You can also expect more people coming in and out of the room to watch and care for your child.
- To help keep the breathing tube in the right place, only specially trained staff will move your child or touch the breathing equipment.

What are vent settings?

Each child has different needs.

- Settings on the vent tell the vent what to do. This includes things like how many breaths per minute and how much oxygen to give your child. These are called “ventilator settings.”
- Your child's doctor will order vent settings for your child based on their needs.
- The settings may change over time.

What is weaning?

Your child's doctor may order changes to the vent settings when they see that your child is improving. The vent does less as your child breathes more on their own. This is called “weaning” the vent.

Your child's doctor may order the vent settings to be lowered when your child:

- Can breathe with little help from the vent.
- Does not get too tired from breathing.
- Has an improved chest X-ray.
- Has improved levels of oxygen, carbon dioxide and acid (blood gases).

When can my child come off the vent?

- Your child may need the vent for a short time or a long time.
- Your child's doctors will decide when to take your child off the vent based on their needs and condition.
- The care team may check many things before trying to take your child off the vent and removing the breathing tube. This may include:
 - Chest X-ray results.
 - Blood gases.
 - Your child's heart rate and blood pressure.
 - How fast they are breathing.
 - When your child is able to protect their airway by coughing up mucus.
 - When they have a gag reflex.

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When your child needs a ventilator, continued

- Your child may not eat or drink anything for 4 hours after the breathing tube comes out.
- Sometimes, a child may not breathe well after the breathing tube comes out. The doctor may need to put the breathing tube back in and reconnect the vent if this happens.

What happens after my child comes off the vent?

Your child will still need medical care and breathing support, even after they come off the vent. This may include:

- Oxygen by tube or mask
- Breathing treatments
- Suctioning
- Other treatment and support as needed

Please ask the care team if you have any questions about the vent or your child's care. We are happy to explain things to you.

This teaching sheet contains general information only. Talk with your child's doctor or a member of your child's healthcare team about specific care of your child.

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